



REGISTRATION USER GUIDE

For Eligible Professionals

Medicaid Electronic Health Record (EHR) Incentive Program



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Disclaimer

The Centers for Medicare & Medicaid Services (CMS) is providing this material as an informational reference for physicians and non-physician practitioners-providers.

Although every reasonable effort has been made to assure the accuracy of the information within these pages at the time of posting, the Medicare and Medicaid program is constantly changing, and it is the responsibility of each physician, non-physician practitioner, supplier or provider to remain abreast of the Medicare and Medicaid program requirements.

Step I – Getting Started

This is a step-by-step guide for the Medicaid Eligible Professionals (EPs) Electronic Health Record (EHR) Incentive Program. The page layout consists of the registration screen with written instructions to the right, as well as helpful tips at the bottom. To get started, click on the link at the top of the page or type the website into your computer's browser.



Medicare & Medicaid EHR Incentive Program Registration and Attestation System

Welcome to the Medicare & Medicaid EHR Incentive Program Registration & Attestation System

About This Site

The Medicare and Medicaid Electronic Health Records (EHR) Incentive Programs will provide incentive payments to eligible professionals and eligible hospitals as they demonstrate adoption, implementation, upgrading, or meaningful use of certified EHR technology. These incentive programs are designed to support providers in this period of Health IT transition and instill the use of EHRs in meaningful ways to help our nation to improve the quality, safety, and efficiency of patient health care.

This web system is for the Medicare and Medicaid EHR Incentive Programs. Those wanting to take part in the program will use this system to register and participate in the program.

Additional Resources: For User Guides to Registration and Attestation that will show you how to complete these modules, a list of EHR technology that is certified for this program, specification sheets with additional information on each Meaningful Use objective, and other general resources that will help you complete registration and attestation, please visit [CMS website](#)

Eligible to Participate - There are two types of groups who can participate in the programs. For detailed information, visit [CMS website](#)

* [Eligible Hospitals](#)

* [Eligible Professionals \(EPs\)](#)

[CONTINUE](#)

STEPS

Enter the EHR
Incentive Program
URL (located at the
top of the page) into
your web browser

Click **CONTINUE**
to start the
registration process




TIPS

To determine your eligibility,
click on the **CMS website**

For a list of Eligible Professionals
(EPs), click on the **+** next to
Eligible Professionals

Step 1 - Continued

Once you have clicked on the  you will be presented with a list of professionals who are eligible to participate in the program.




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Eligible to Participate - There are two types of groups who can participate in the programs. For detailed information, visit [CMS website](#) .

[Eligible Hospitals](#)

[Eligible Professionals \(EPs\)](#)

Medicare EPs include:

- Doctors of Medicine or Osteopathy
- Doctors of Dental Surgery or Dental Medicine
- Doctors of Podiatric Medicine
- Doctors of Optometry
- Chiropractors

Medicaid EPs include:

- Physicians
- Nurse Practitioners
- Certified Nurse - Midwife
- Dentists
- Physicians Assistants who practice in a Federally Qualified Health Center (FQHC) or Rural Health Center (RHC) that is led by a Physician Assistant

Further, Medicaid EPs must also:

- Have a minimum of 30% Medicaid patient volume (20% minimum for pediatricians), OR
- Practice predominantly in a FQHC or RHC and have at least 30% patient volume to needy individuals

NOTE: EPs may NOT be hospital-based. This is defined as any provider who furnishes 90% or more of their services in a hospital setting (inpatient or emergency room).

[CONTINUE](#)

STEPS

Review the list of Eligible Professionals (EPs)

Click **CONTINUE** to start the registration process



TIP

Eligible Professionals (EPs) may not be hospital based. This is defined as EPs seeing 90% or more of their Medicare covered services in:

- Hospital Inpatient setting (Place of service 21)
- Emergency Department setting (Place of service 23)

Step 2 – Login

Review the Login Instructions for Eligible Professionals.



Medicare & Medicaid EHR Incentive Program Registration and Attestation System

Login

Login Instructions

(*) Red asterisk indicates a required field.

Eligible Professionals (EP)

- If you are an EP, you must have an active National Provider Identifier (NPI) and have a National Plan and Provider Enumeration System (NPPES) web user account. Use your NPPES user ID and password to log into this system.
- If you are an EP who does not have an NPI and/or an NPPES web user account, navigate to [NPPES](#) to apply for an NPI and/or create an NPPES web user account.

Eligible Hospitals

- If you are an Eligible Hospital, you must have an active NPI. If you do not have an NPI, apply for an NPI in [NPPES](#).
- Users working on behalf of an Eligible Hospital(s) must have an Identity and Access Management system (I&A) web user account (User ID/Password) and be associated to an organization NPI. If you are working on behalf of an Eligible Hospital(s) and do not have an I&A web user account, [Create a Login](#) in the I&A System.

Account Management

- If you are an existing user and need to reset your password, visit the [I&A System](#).
- If you are having issues with your User ID/Password and are unable to log in, please contact the EHR Incentive Program Information Center at 888-734-6433 / TTY: 888-734-6563.

WARNING: Only authorized registered users have rights to access the Medicare & Medicaid EHR Incentive Program Registration & Attestation System. Unauthorized access to this system is forbidden and will be prosecuted by law. By accessing this system users are subject to monitoring by system personnel. Anyone using this system expressly consents to monitoring and is advised that if such monitoring reveals possible evidence of criminal activity, system personnel may provide the evidence of such monitoring to law enforcement officials.

* User ID:

* Password:

LOG IN

STEPS

Enter your National Plan and Provider Enumeration System (NPPES) web user account, user ID and password to log into the registration system.

Click **LOG IN**



TIPS

Contact the PECOS Help Desk if you cannot remember your password- (866) 484-8049/ TTY (866)523-4759, <https://pecos.cms.hhs.gov>

To locate your NPI number, visit: <https://nppes.cms.hhs.gov/NPPES/NPIRegistryHome.do>

User name and password are case sensitive

Step 3 – Welcome

If your login was successful you will receive the “Welcome Screen”.



Medicare & Medicaid EHR Incentive Program Registration and Attestation System

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Welcome Jane Doe

Last Successful Login: 12/07/2010 | Unsuccessful Login Attempts: 0

Notifications

Welcome to the Medicare & Medicaid EHR Incentive Program Registration & Attestation System

For Medicare EHR incentive program participants, you will need to demonstrate meaningful use of certified EHR technology.

For Medicaid EHR incentive program participants, you will need to demonstrate adoption, implementation, upgrading, or meaningful use of certified EHR technology in your first year and demonstrate meaningful use for the remaining years in the program. Attestation for Medicaid occurs through your State Medicaid Agency.

Instructions

Select any tab to continue.

[Registration Tab](#)

Please select the Registration tab above to perform any of the following actions:

- Register in the Incentive Payment Program
- Continue Incomplete Registration
- Modify Existing Registration
- Resubmit a Registration that was previously deemed ineligible
- Reactivate a Registration
- Switch Incentive Programs (Medicare/Medicaid)
- Switch Medicaid State
- Cancel participation in the Incentive Program

Attestation Tab

Please select the Attestation tab above to perform any of the following actions:

Medicare

- Attest for the Incentive Program
- Continue Incomplete Attestation
- Modify Existing Attestation
- Discontinue Attestation

Note: Attestation for the Medicaid incentive program occurs at the State Medicaid Agency.

Status Tab

Please select the Status tab above to perform the following action:

- View current status of your Registration, Attestation, and Payment(s) for the Incentive Program

Account Management Tab

Please select the Account Management tab above to perform the following action:

- Update your user account information

STEPS

Click on the **REGISTRATION TAB** to continue registering for the EHR Incentive Program.



TIPS

The Welcome screen consists of five tabs to navigate through the registration and attestation process.

- Home
- Registration
- Attestation (Attestation Tab is for Medicare EPs and EHs only. Medicaid EPs attest with their State. Contact your state for more information)
- Status
- Account Management

Meaningful Use information:

https://www.cms.gov/EHRIncentivePrograms/30_Meaningful_Use.asp

Step 4 – Registration



Medicare & Medicaid EHR Incentive Program Registration and Attestation System

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Registrations

Registration Instructions

Welcome to the Registration Page.

Depending on the current status of your registration, please select one of the following actions:

Register

- Register for the EHR Incentive programs
- Continue an incomplete registration

Modify

- Modify Existing Registration
- Switch Incentive Programs (Medicare/Medicaid)
- Switch Medicaid State

Cancel

- Discontinue participation in the Medicare & Medicaid EHR incentive programs

Reactivate

- Reactivate a previously canceled registration

Resubmit

- Resubmit a registration that was previously deemed ineligible.

Registration Selection

Identify the desired registration and select the Action you would like to perform. Please note only one Action can be performed at a time on this page.

Name	Tax Identifier	National Provider Identifier (NPI)	Registration Status	Action
Jane Doe	XXX-XX-2454 (SSN)	123456789		Register

STEPS

Click on **REGISTER** in the Action column to continue the registration process.



TIPS

“Resubmit”, “Modify”, “Cancel” and “Reactivate” are the available Action web links for returning users

Only one action can be performed at a time on this page

If the user selects the Action web link of “Register” or “Resubmit” they will be directed to the Topics for Registration screen

Step 5 – Reason for this Registration

Review and follow the registration instructions below.



Medicare & Medicaid EHR Incentive Program Registration and Attestation System

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Topics for this Registration

Registration ID: 1000001077

Reason for Registration

- You are an Eligible Professional registering in the incentive program.
- You have modified your registration information.

Topics

The data required for this registration is grouped into topics. In order to complete registration, you must complete ALL of the following topics. Please click on Start Registration or Modify Registration to provide the required information. The system will show checks for item when completed.

Completed	Topics
—	EHR Incentive Program
—	Personal Information
—	Business Address & Phone

Note:

When all topics are checked as completed, select the **BEGIN SUBMISSION** button to submit your registration.

START REGISTRATION

BEGIN SUBMISSION »

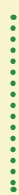
STEPS

Click on **START REGISTRATION** to continue with the Topics for this Registration.

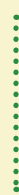


TIPS

Data required for this registration is grouped into three topics. All three must be **completed**



Check marks will appear in the **completed** column to indicate that the topics are complete



When all topics are checked **completed** user can select **BEGIN SUBMISSION**

Step 6 – Incentive Program Questionnaire

Review and follow the Incentive Program Questionnaire instructions below.



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Home | Registration | Attestation | Status | Account Management

EHR Incentive Program

Incentive Program Questionnaire

(*) Red asterisk indicates a required field.

Not sure which incentive program to select? For information on the requirements and the differences between the Medicare and Medicaid EHR incentive programs visit the [CMS Website](#).

***Please select your Incentive Program**

☐ Medicare ☒ Medicaid

Note: Medicare EPs cannot receive both Medicare EHR and e-Prescribing incentive payments.

***Medicaid State/Territory:** [Why is my state not here?](#)

***Please select your Eligible Professional Type:**

The EHR incentive programs require the use of EHR technology certified for this program. For more information about certified EHRs, visit the [CMS Website](#).

***Do you have a certified EHR?**

☐ Yes ☒ No

Note: A certified EHR is not required to complete the registration process, but an EHR Certification Number will be required when you attest for payment.

Incentive Program Questionnaire

(*) Red asterisk indicates a required field.

Not sure which incentive program to select? For information on the requirements and the differences between the Medicare and Medicaid EHR incentive programs visit the [CMS Website](#).

***Please select your Incentive Program**

☐ Medicare ☒ Medicaid

Note: Medicare EPs cannot receive both Medicare EHR and e-Prescribing incentive payments.

***Medicaid State/Territory:** [Why is my state not here?](#)

***Please select your Eligible Professional Type:**

Select
Physician
Nurse Practitioner
Certified Nurse - Midwife
Dentist
Physician Assistant participating in FQHC or RHC by a PA

The EHR incentive programs require the use of EHR technology certified for this program. For more information about certified EHRs, visit the [CMS Website](#).

A certified EHR is not required to complete the registration process, but an EHR Certification Number will be required when you attest for payment.

STEPS

Select Medicaid and click on **APPLY**

Select your Medicaid State/Territory.

Select your Eligible Professional Type.

Click **Yes** or **No** at 'do you have a certified EHR?' If yes, enter the EHR Certification Number if you have it.

Click **SAVE AND CONTINUE**



TIPS

States are launching their programs at different times, so your state may not yet be available. Click on the CMS website link for more information.

<https://www.cms.gov/EHRIncentivePrograms/>

Click on the CMS EHR Certification Number website to obtain your certified EHR number.

<http://healthit.hhs.gov/CHPL>

Follow the instructions on the website to locate your CMS EHR Certification Number

You must enter your certification number when Attesting for the EHR Incentive Program. The number is not required for registration

Step 7 – Personal Information

Follow the instructions below regarding your personal information.



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Personal Information

Name

First Name: Nichole

Middle Name:

Last Name: Davick

Suffix:

Identifiers

(*) Red asterisk indicates a required field.

Please note, the tax identification number (TIN) captured below will receive the EHR incentive payment.

Social Security Number (SSN): XXX-XX-2454 (SSN)

National Provider Number (NPI): 123456789

*Payee TIN Type: SSN **APPLY**

[PREVIOUS PAGE](#)

SAVE AND CONTINUE

Identifiers

(*) Red asterisk indicates a required field.

Please note, the tax identification number (TIN) captured below will receive the EHR incentive payment.

Social Security Number (SSN): XXX-XX-2454 (SSN)

National Provider Number (NPI): 123456789

*Payee TIN Type: EIN **APPLY**

*Group Name:

*Payee TIN:

*Payee NPI:

[PREVIOUS PAGE](#)

SAVE AND CONTINUE

STEPS

Select where your payment will go in the Payee TIN Type.

Click **APPLY**

SSN Payee TIN Type indicates that the provider receives the payment.

EIN Payee TIN Type indicates the group receives the payment.

Enter the Group Name and Group Payee TIN and NPI Number.

Click **SAVE AND CONTINUE**



TIP

Medicaid EPs can elect to have their payment go to another qualified entity by selecting Payee TIN Type of EIN. This information will be sent to the State. There are rules around reassignments governing this program. Please see the CMS website for more information – <http://www.cms.gov/EHRIncentivePrograms/>

Step 8 – Business Address and Phone

Be sure to complete all requested information.



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Business Address & Phone

(*) Red asterisk indicates a required field. ←

The address provided below will be posted on the EHR incentive program website once you receive payment to show participation in the Medicare EHR incentive program. Please note that the business address listed is the practice location established in NPPES. Updates made to the business address and phone number, will not update the business address and phone number on file in NPPES. To update your business address associated to your NPI, please make your changes in NPPES.

*Address Line 1:
Address Line 2:
*City:
*State:
*ZIP+4: -
*Phone Number
(123) 123-4567: Ext:
*E-mail Address:
*Confirm E-mail Address:

[PREVIOUS PAGE](#)

[SAVE AND CONTINUE](#) ←

STEPS

Review the Business Address & Phone information and revise if applicable.

Enter your e-mail address and confirm the e-mail address.

Click **SAVE AND CONTINUE**



TIPS

Data on this page is pulled from the provider's practice location stored in NPPES, affiliated with the NPI. Address and Phone number can be changed for purposes of this program, however it will not update your NPI record in NPPES. If this information is incorrect, please update your NPPES account as well.

The business address cannot be a P.O. Box address.

Step 9 – Topics for this Registration

Be sure to complete all the topics below.



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STEPS

Click on **BEGIN SUBMISSION** to continue the registration process.

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Topics for this Registration

Registration ID: 1000000703

Reason for Registration

- You are an Eligible Professional registering in the incentive program.
- You have decided to resubmit your registration information.

Topics

The data required for this registration is grouped into topics. In order to complete registration, you must complete ALL of the following topics. Please click on Start Registration or Modify Registration to provide the required information. The system will show checks for item when completed.

Completed	Topics
<input checked="" type="checkbox"/>	EHR Incentive Program
<input checked="" type="checkbox"/>	Personal Information
<input checked="" type="checkbox"/>	Business Address & Phone

Note:

When all topics are checked as completed, select the **BEGIN SUBMISSION** button to submit your registration.

[MODIFY REGISTRATION](#) | [BEGIN SUBMISSION](#)



TIP

Check marks indicate that the topics are **completed**

Step 10 – Verify Registration

Be sure to verify all your personal information.



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Verify Registration

Registration Information

Please review the summary below to ensure this is the correct registration information and reason you wish to submit. If the summary below is correct, select the SUBMIT button at the bottom of this page. To edit your information, select the PREVIOUS PAGE button.

Registration ID: 1000000703	Business Address:
Name: Jane Doe	7500 Security Blvd
TIN: XXX-XX-2454 (SSN)	Baltimore, MD, 21244-1849
NPI: 123456789	Phone #: (410) 786-1000
Incentive Program: Medicare	E-Mail: Jane.Doe@cms.gov

Reason(s) for Submission

- You are an Eligible Professional registering in the incentive program.
- You have decided to resubmit your registration information.

[PREVIOUS PAGE](#)

[SUBMIT](#)



STEPS

Review your registration information for accuracy and click **SUBMIT** to continue.



TIP

Click on *PREVIOUS PAGE* to revise your information.
The topics for registration screen presents then click on *MODIFY* to modify your registration.

Step 11 – Registration Disclaimer

Be sure to read the entire disclaimer.



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Registration Disclaimer

General Notice

NOTICE: Any person who knowingly files a statement of claim containing any misrepresentation or any false, incomplete or misleading information may be guilty of a criminal act punishable under law and may be subject to civil penalties.

Accept, Agree and Submit

I certify that the foregoing information is true, accurate, and complete. I understand that the Medicare/Medicaid EHR Incentive Program payment I requested will be paid from Federal funds, that by filing this registration I am submitting a claim for Federal funds, and that the use of any false claims, statements, or documents, or the concealment of a material fact used to obtain a Medicare/Medicaid EHR Incentive Program payment, may be prosecuted under applicable Federal or State criminal laws and may also be subject to civil penalties.

I hereby agree to keep such records as are necessary to demonstrate that I met all Medicare/Medicaid EHR Incentive Program requirements and to furnish those records to the Medicaid State Agency, Department of Health and Human Services, or contractor acting on their behalf.

No Medicare/Medicaid EHR Incentive Program payment may be paid unless this registration form is completed and accepted as required by existing law and regulations (42 CFR 495.10).

NOTICE: Anyone who misrepresents or falsifies essential information to receive payment from Federal funds requested by this form may upon conviction be subject to fine and imprisonment under applicable Federal laws.

ROUTINE USE(S): Information from this Medicare/Medicaid EHR Incentive Program registration form and subsequently submitted information and documents may be given to the Internal Revenue Service, private collection agencies, and consumer reporting agencies in connection with recoupment of any overpayment made and to Congressional Offices in response to inquiries made at the request of the person to whom a record pertains. Appropriate disclosures may be made to other federal, state, local, foreign government agencies, private business entities, and individual providers of care, on matters relating to entitlement, fraud, program abuse, program integrity, and civil and criminal litigation related to the operation of the Medicare/Medicaid EHR Incentive Program.

DISCLOSURES: Voluntary; however, failure to provide information will result in delay in payment or may result in denial of EHR Incentive Payment. With the one exception discussed below, there are no penalties under these programs for refusing to supply information. However, failure to furnish information on this registration form will prevent EHR Incentive Payment from being issued. Failure to furnish subsequently requested information or documents will result in the issuance of an overpayment demand letter followed by recoupment procedures.

It is mandatory that you tell us if you believe you have been overpaid under the Medicare/Medicaid EHR Incentive Program. The Patient Protection and Affordable Care Act, Section 6402, Section 1128J, provides penalties for withholding this information.

[AGREE](#)

[DISAGREE](#)



TIP

If DISAGREE is chosen, the user is directed to the Registration Instructions Page. To restart the process, click MODIFY in the Action column of the Registration Instructions Page

STEPS

Read the disclaimer and click on **AGREE** or **DISAGREE** at the bottom of the page.

Step 12 – Submission Receipt (Successful Submission)

Confirm that your registration was completed successfully.



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Submission Receipt

Successful Submission

You have successfully registered for the EHR Incentive Payment Program.

IMPORTANT! Please note:

- If you are a Medicaid provider, your State Medicaid Agency will need to collect and verify additional eligibility information. After 24 hours, please continue your registration using your State's eligibility verification tool. You can find your State [here](#). Your State will also collect any information to support a program attestation for Medicaid providers (i.e., Medicaid providers will not use the attestation feature on this site). Your State Medicaid Agency may also contact you through the email and/or street addresses you provided in this registration to explain how to continue the eligibility process.
- You may switch between Medicaid and Medicare any time prior to your payment being initiated. This means that when [Medicare or the State Medicaid Agency] begins calculating and disbursing your payment, you will be unable to switch between Medicaid and Medicare.

Registration Tracking Information

Registration ID: 1000000703

Name: John Doe

Submitted Date: 12/14/2010

Reason(s) for Submission:

- You are an Eligible Professional registering in the incentive program.
- You have decided to resubmit your registration information.

PRINT

RETURN TO HOME

STEPS

You must contact your State to complete your registration.

Continue your registration using the State's Medicaid EHR registration tool.

Click on **You can find your State [here](#)** to complete the Medicaid registration.



TIPS

Wait 24 hours to contact your State to finish the registration, to allow for processing

Print a copy of the receipt for your records. You will not receive an email confirmation of this registration

Step 13 – Status Summary

Review all current and previous information related to your account.



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Status Summary

Page Instructions

You have successfully navigated to the Status Summary page.

The following table outlines a list of all records associated with your account. Please select one of the following records to navigate to the Status Detail page, to review all current and historical information related to your registration.

Action	Name	Tax Identifier	National Provider Identifier (NPI)	Registration Submission Date	Program Type
Select	Jane Doe	XXX-XX-2454 (SSN)	123456789	12/07/2010	Medicare

STEPS

Click the **STATUS** tab to view registration summary.



TIP

Click **Select** in the Action Column to view detail.

Step 13 – Status Detail

Review the details of your registration process.



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Status Detail

EHR Incentive Program Information

The following table outlines the current and historical events for your EHR Incentive Program. The information captured below represents all relevant sequences of events for the past 24 months.

- Your MEDICAID EHR Incentive Program registration was successfully submitted on 2010-12-14.

Registration Detailed Information

Your MEDICAID EHR Incentive Program registration was originally created on 2010-10-27. Your MEDICAID registration was last updated on 2010-12-14.

Registration Status: PENDING STATE VALIDATION	Business Address:
Registration ID: 1000000703	123 Any Street
Name: John Doe	Baltimore, MD, 21244-1849
TIN: XXX-XX-2454 (SSN)	Phone #: xxx-xxx-xxxx Ext
NPI: 1234567890	E-Mail: John.Doe@email.com
Payee NPI: 1234567890	Incentive Program: MEDICAID(MD)
Payee TIN: XXX-XX-2454	EHR Certification Indicator: No
EHR Certification Number:	
Eligible Professional Type: Physician	
Contractor ID: -	

[Additional Information](#)

Attestation Summary Information

No information available at this time.

Payment Summary Information

No information available at this time.

[PREVIOUS PAGE](#)

[Additional Information](#)

Registration Status Reason: Registration has been saved and will be sent to the state for review

FI/Carrier/MAC: - -

Validations performed on registration :

No OIG Exclusion(s) have been applied to PECOS Medicare Enrollment: Passed

Eligible Professional Type corresponds with PECOS Medicare Enrollment specialty: Not Run

Approved Medicare Enrollment in PECOS: Not Run

Not Identified as deceased in the Death Master File: Passed

Active NPI in NPPES: Passed

Not Identified as a Hospital-based Eligible Professional: Not Run

STEPS

Registration details appear in the body of the screen.

Click **ADDITIONAL INFORMATION** for the registration status reason, Fiscal Intermediary (FI)/Carrier/Medicare Administrative Contractor (MAC) and validations performed on registration.



TIPS

Registration status will read **PENDING STATE VALIDATION** until the registration process is completed by the State

Other registration statuses are, **PENDING STATE APPROVAL**, **ISSUE PENDING**, **IN PROGRESS**, and **REJECTED**. The status reason is listed on the Additional Information page

Have Questions?

There are many resources available to you.



Medicare & Medicaid EHR Incentive Program Registration and Attestation System

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Status Detail

EHR Incentive Program Information

The following table outlines the current and historical events for your EHR Incentive Program. The information captured below represents all relevant sequences of events for the past 24 months.

- Your MEDICAID EHR Incentive Program registration was successfully submitted on 2010-12-14.

Registration Detailed Information

Your MEDICAID EHR Incentive Program registration was originally created on 2010-10-27. Your MEDICAID registration was last updated on 2010-12-14.

Registration Status: PENDING STATE VALIDATION

Registration ID: 1000000703

Name: John Doe

TIN: XXX-XX-2454 (SSN)

NPI: 1234567890

Payee NPI: 1234567890

Payee TIN: XXX-XX-2454

EHR Certification Number:

Eligible Professional Type: Physician

Contractor ID: -

Business Address:

123 Any Street

Baltimore, MD, 21244-1849

Phone #: xxx-xxx-xxxx **Ext**

E-Mail: John.Doe@email.com

Incentive Program: MEDICAID(MD)

EHR Certification Indicator: No

Additional Information

Attestation Summary Information

No information available at this time.

STEPS

Click on the **HELP**
LINK which is located
on every screen.

Resources

Contact the EHR Information Center Help Desk for Questions concerning
registration, (888) 734-6433 / TTY: (888) 734-6563

Hours of operation: Monday-Friday 8:30 a.m. – 4:30 p.m. in all time zones
(except on Federal holidays)

NPPES Help Desk for assistance. Visit;
<https://nppes.cms.hhs.gov/NPPES/Welcome.do>,
(800) 465-3203 / TTY (800) 692-2326



TIP

EHR Incentive Program; visit
<http://www.cms.gov/EHRIncentivePrograms/>

Acronym Translation

CMS	Centers for Medicaid & Medicaid Services
DMF	Social Security Death Master File
EH	Eligible Hospital
EHR	Electronic Health Record
EIN	Employer's Identification Number
EIPIC	EHR Incentive Program Information Center
EP	Eligible Professional
FI	Fiscal Intermediary
FQHC	Federally Qualified Health Center
I&A	Identification & Authentication System
IDR	Integrated Data Repository
LBN	Legal Business Name
MAC	Medicaid Administrative Contractor
MAO	Medicaid Advantage Organization
NPI	National Provider Identifier
NPPES	National Plan and Provider Enumeration System
NLR	National Level Repository
OIG	Office of the Inspector General
RHC	Rural Health Center
SSN	Social Security Number
TIN	Tax Identification Number

ACRONYMS

